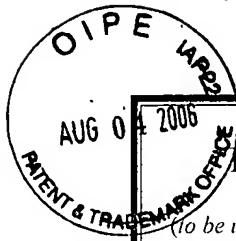


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PTO/SB/21

OMB 0651-0031



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/526,264
		Filing Date	01/20/2006
		First Named Inventor	Alan Owen
		Group Art Unit	3673
		Examiner Name	Frederick Lagman
Total Number of Pages in This Submission		Attorney Docket Number	207733 (36290-0324-00-US)

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) – Figs. <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): check in the amount of \$260; return receipt postcard
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Drinker Biddle & Reath LLP
Signature	
Printed Name	Gregory J. Lavoragna, Reg. No. 30,469
Date	August 1, 2006

CERTIFICATE OF MAILING UNDER 37 CFR 1.8

I hereby certify that this paper, along with any documents referred to as being enclosed therewith, is being deposited with the United States Postal Service in an envelope addressed to U.S. Patent Office, Assistant Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

Typed or printed name	Michelle D. Sebastian
Signature	Date: August 1, 2006

O I P E AUG 04 2006 PATENT & TRADEMARK OFFICE						Complete if known									
FREE TRANSMITTAL for FY 2005 <i>(All fees are subject to annual revision.)</i> Applicant claims small entity status. See 37 CFR 1.27						Application Number		10/526,264							
						Filing Date		01/20/2006							
						First Named Inventor		Alan Owen							
						Examiner Name		Frederick Lagman							
						Art Unit		3673							
TOTAL AMOUNT OF PAYMENT (\$260.00)						Attorney Docket No.		207733 (36290-0324-00-US)							
METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)									
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number <u>50-0573</u> Deposit Account Name <u>Drinker Biddle & Reath LLP</u> The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.						ADDITIONAL FEES									
						Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description			Fee Paid		
						1051	130	2051	65	Surcharge - late filing fee or oath					
						1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet					
						1053	130	1053	130	Non-English specification					
						1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination					
						1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action					
						1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action					
						1251	120	2251	60	Extension for reply within first month			60		
						1252	450	2252	225	Extension for reply within second month					
						1253	1,020	2253	510	Extension for reply within third month					
						1254	1,590	2254	795	Extension for reply within fourth month					
						1255	2,160	2255	1,080	Extension for reply within fifth month					
						1401	500	2401	250	Notice of Appeal					
						1402	500	2402	250	Filing a brief in support of an appeal					
						1403	1,000	2403	500	Request for oral hearing					
						1451	1,510	1451	1,510	Petition to institute a public use proceeding					
						1452	500	2452	250	Petition to revive - unavoidable					
						1453	1,500	2453	750	Petition to revive - unintentional					
						1501	1,400	2501	700	Utility issue fee (or reissue)					
						1503	1,100	2503	550	Plant issue fee					
						1462	400	1462	400	Petition to the Commissioner - Group I					
						1463	200	1463	200	Petition to the Commissioner - Group II					
						1464	130	1464	130	Petition to the Commissioner - Group III					
						1807	50	1807	50	Processing fee under 37 CFR 1.17(q)					
						1806	180	1806	180	Submission of Information Disclosure Stmt					
						1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))					
						1801	790	2801	395	Request for Continued Examination (RCE)					
						1802	900	1802	900	Request for expedited examination of a design application					
						Other fee (specify)									
FEE CALCULATION															
EXTRA CLAIMS FEES FOR UTILITY AND REISSUE															
Total Claims 28 -20** = 0 X * = \$ 0															
Independent Claims 5 - 3** = 2 X 100 = \$200															
Multiple Independent + 360/180 = \$0															
Large Entity Fee Code (\$)						Entity Fee (\$)		Small Entity Fee Code (\$)		Entity Fee (\$)		Fee Description			
1202 50 2202 25 Claims in excess of 20															
1201 200 2201 100 Independent claims in excess of 3															
1203 360 2203 180 Multiple dependent claim, if not paid															
1204 200 2204 100 **Reissue independent claims over original patent															
1205 50 2205 25 **Reissue claims in excess of 20 and over original patent															
**or number previously paid, if greater; For Reissue, see above															
SUBMITTED BY CUSTOMER NO. 23973						Complete (if applicable)									
Name (Print/Type)		Gregory J. Lavorgna				Registration No. (Attorney/Agent)		30,469		Telephone		(215) 988.2700			
Signature										Date		August 1, 2006			